01 02





a send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

	CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of	mailing can only be used for is certificate cannot be used	or domestic mailings of	
					papers. Each additions	al paper, such as an assignment of mailing or transmission.	ent or formal drawing, n	
	 ,	590 09/09/2005						
	OLIFF & BERRIDGE, PLC				Cer L hereby certify that the	rtificate of Mailing or Trans	mission g denosited with the Un	
	P.O. BOX 19928				States Postal Service	I hereby certify that this Fee(s) Transmittal is being deposited with the U States Postal Service with sufficient postage for first class mail in an envaddressed to the Mail Stop ISSUE FEE address above, or being facs transmitted to the USPTO (571) 273-2885, on the date indicated below.		
,,	ALEXANDRIA, V 2005 MBEYENE2 00000				transmitted to the USF			
/ 1	COOD HRETENEE COON	100001 1001					(Depositor's n	
	1501 1400.00 OP						(Signa	
o .	1504	300.00 DP					(1	
	APPLICATION NO.	FILING DATE	<u>T</u>	FIRST NAME	ED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO	
10/808,354 03/25/2004		<u></u>		i Tanaka	111988.01	5452		
_	APPLN, TYPE	SMALL ENTITY	ISSUE FI	FF	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
_		L			\$300	\$1700	12/09/2005	
	nonprovisional	NO	\$1400		-	\$1700 1	12/09/2003	
EXAMINER		ART UN	IT	CLASS-SUBCLASS	J			
	TON, MINH TOAN T		2871		349-123000			
	☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			listed, no name will be printed.				
. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee de recordation as set forth in 37 CFR 3.11. Completion of this form is NOT				data will ap F a substitute	pear on the patent. If an assign e for filing an assignment.	nee is identified below, the d	ocument has been file	
	(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
	Seiko Epson Corporation Tokyo, JAPAN							
_		assignee category or category	ories (will not be pri	inted on the	patent): 🗖 Individual 🛛 C	orporation or other private gr	oup entity Government	
	The following fee(s) are Issue Fee	enclosed:	46	Payment o	f Fee(s): in the amount of the fee(s) is er	nclosed (Check no.	173901 \$1700	
		mall entity discount permitt	ed)		t by credit card. Form PTO-203		·	
	Advinnce Order - # of		,	The Director is hereby authorized by charge the required fee(s), or credit any overpayment,				
			· · · · · · · · · · · · · · · · · · ·	Deposit Ac	count Number <u>15</u> 20461	(enclose an extra c	opy of this form).	
	Change in Entity Status	(from status indicated abov	•					
5. (_ ` .	MALL ENTITY status. See	37 CFR 1.27.		cant is no longer claiming SMA			
	a. Applicant claims S							
	a. Applicant claims S	is requested to apply the Iss ublication Fee (if required) ords of the United States Par	ue Fee and Publicat will not be accepted ent and Trademark	tion Fee (if a I from anyor Office.	ny) or to re-apply any previous ne other than the applicant; a reg	istered attorney or agent; or the	ation identified above. he assignee or other par	
h	a. Applicant claims S	is requested to apply the Iss ublication Fee (if required) ords of the United States Pat Luda MS		tion Fee (if a I from anyor Office.		istered attorney or agent; or the application of the agent is the agent is the agent is a second of the agent is a second	ation identified above, the assignee or other par	

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.